Print Form

Lane County Sheriff's Office
Concealed Handgun License Application
(for renewals & new applicants)

Legal Name: _____ Telephone: _____

Other Names Used: (Maiden, etc.) _____

Address: _____ Zip Code: _____

Mailing Address if Different: _____ Zip Code: _____

Age: _____ Date of Birth: _____ Place of Birth: (State or Country) _____ US Citizen? ◯ Yes ◯ No

Gender: ◯ Male ◯ Female Race: _____ Height - Feet: _____ Inches: _____ Weight: _____

Hair Color: _____ Eye Color: _____ SSN: _____ (This is voluntary. Solicitation of the number is authorized under ORS 166.291. It will only be used as a means of identification.)

Residence Addresses for the Last Three Years (if different from above):

_____ City: _____ State: _____

_____ City: _____ State: _____

Since the age of 18, I have also lived, worked, been stationed or gone to school in the following states:

_____

Prior Military Service? ◯ Yes ◯ No Branch: _____

New Applicants Only --- must provide proof of handgun competency, and two character references on the Character Reference Form on the back of this application (permits expired beyond 45 days are considered "new" applications).

Proof of Identification: Two pieces of *current ID* are required. One piece must have a photograph.

-----Sheriff's Office Use Only-----

ID:_____ No._____

ID:_____ No._____

Competency:_____

Initial each box indicating that you have read each statement.

PLEASE READ CAREFULLY

I HEREBY DECLARE AS FOLLOWS:

☐ Agree ☐ Disagree I am a citizen of the United States or a legal resident alien who can document continuous residency in Lane County for at least six months and have declared in writing to the United States INS my intention to become a citizen and can present proof of the written declaration to the Sheriff at the time of this application (e.g. INS Form N400 received by the INS).
I will be eligible to apply for citizenship on :_____
(Date)

☐ Agree ☐ Disagree I am now at least 21 years of age.

☐ Agree ☐ Disagree I have not been under the jurisdiction of the juvenile department in the last four years for committing an act, that if commited by an adult, would consitute a felony or a misdemeanor involving violence as defined in ORS 166.470. If I have, I have been granted relief from the disability under ORS 166.274 or ORS 166.293 or 18 USC 925(c) or have had the records expunged.

☐ Agree ☐ Disagree I have **NEVER** been convicted of a felony or found guilty of a felony, except for insanity under ORS 161.295, in the State of Oregon, or elsewhere.

☐ Agree ☐ Disagree I have **NOT**, within the last four years, been convicted of a misdemeanor or found guilty of a misdemeanor, except for insanity under ORS 161.295.

☐ Agree ☐ Disagree There are no outstanding warrants for my arrest.

☐ Agree ☐ Disagree I am not free on any form of pretrial release.

☐ Agree ☐ Disagree I have not been committed to the Department of Human Services under ORS426.130, nor have I been found mentally ill and am presently subject to an order prohibiting me from purchasing or possessing a firearm because of mental illness. If any of the previous conditions do apply to me, I have been granted relief or wish to petition for relief from the disability under ORS 166.274 or 166.293 or 18 USC 925 (c) or have had the records expunged.

☐ Agree ☐ Disagree I am not subject to a citation issued under ORS 163.735 or an order issued under ORS 30.866, 107.700 to 107.735 or 163. 738 (stalking or restraining orders).

☐ Agree ☐ Disagree Except as provided in ORS 166.291(1)(L), I have not been convicted of an offense involving controlled substances or completed a court-supervised drug diversion program.

☐ Agree ☐ Disagree I have never received a dishonorable discharge from the Armed Forces of the United States.
(NOTE: you are required to provide documentation of your military discharge status with this application.)

☐ Agree ☐ Disagree I am not required to register as a sex offender in any state.

☐ Agree ☐ Disagree I understand I will be fingerprinted (new applicants and transfers only), photographed and a confidential background investigation will be conducted by the Lane County Sheriff's Office.

☐ Agree ☐ Disagree I understand that *I am responsible for providing* additional documentation as requested by the Sheriff's Office regarding any prior criminal charges that cannot be readily obtained from other agencies for the purpose of completing my background check as required by ORS.

☐ Agree ☐ Disagree I further acknowledge that the granting of a concealed handgun license by the Lane County Sheriff's Office does not convey permission to possess a firearm if I am prohibited from doing so under the Federal Gun Control Act, 18 USC 922. Under that Federal Law, several classes of person are prohibited from possessing a firearm, including:

- Persons who have been dishonorably discharged from the United States Armed Forces
- Persons who have renounced their United States citizenship
- Persons who are unlawful users of a controlled substance
- Persons who are subject to any type of restraining or stalking order issued by any court
- Persons who have been convicted of a misdemeanor crime of domestic violence

☐ Agree ☐ Disagree I have read the entire text of, and understand this application; and, the statements therein are correct and true. I further understand that making false statements on this application is a misdemeanor and I am subject to arrest and prosecution and automatic CHL denial or revocation.

THIS IS A REQUIREMENT FOR NEW APPLICANTS ONLY-
I am providing the following documentation as proof of US Citizenship:

☐ **Original or Certified Copy of Birth Certificate (not hospital footprints)** ☐ **US Passport** ☐ **FFS240** ☐ **Naturalization Papers**

RESIDENCY REQUIREMENTS - Select **ONE**

☐ I have a current Oregon driver's license showing a residence in Lane County.

☐ I am registered to vote in Lane County, and have a precinct memorandum card showing a residence in Lane County.

☐ I have documentation showing that I currently own or lease real property in Lane County.

☐ I have documentation showing that I filed an Oregon tax return for the most recent tax year showing a Lane County residence.

☐ I understand that if my address changes at any time while I have a Concealed Handgun License that I must notify this office of the change in order to obtain a new license as required by ORS.

- If you move to another Lane County address, you may visit our website to obtain the necessary form and mail it to our office with the required $15.00 fee. We will then mail a new licence to you (ORS 166.291(5).
- If you move to another county or another state, contact your new local Sheriff's Office for guidance.

_____ _____
(Signature - Full Legal Name Date

Lane County Sheriff's Office
Concealed Handgun License -
Character Reference Form

(This form is not required if renewing an unexpired *Concealed Handgun License)*

- Two character references are required for the processing of your Concealed Handgun License.
- Print the reference name, address, and phone number below.

References for: _____

(Applicant's Name)

For New Applicants and Expired Permits (beyond 45 days) Only

References:

List two character references and their addresses. Please advise your references that we may be contacting them during the background process.

1. _____ Telephone: _____

(Name and complete mailing address)

2. _____ Telephone: _____

(Name and complete mailing address)

References must be included with your Application